

City of Menomonie
Heating, Ventilating & Air Conditioning Application

Customer: _____ **Date** _____

Property Address: _____

Estimated Cost of Project: \$ _____

Contractor Name: _____

WI HVAC Contractor Registration Number: _____

Address: _____

Phone #: _____ **Cell Phone #:** _____

E-mail: _____

___ Nat. Gas ___ LP Gas ___ Oil ___ Electric ___ Other

___ Commercial ___ Residential ___ NEW ___ REPLACEMENT

Equipment Type & Description of Project*: _____

***If there is a need for a new meter or reconnect from Xcel Energy, please complete the following information:**

_____ 7 inch Meter _____ 2# Meter _____ Other

_____ Number of Meters _____ Total Connected Load in BTU/per meter

Mail check & application to: City of Menomonie Inspection Department
800 Wilson Avenue
Menomonie WI 54751

You may submit application by email to: kweber@menomonie-wi.gov if preferred.

Inspection appointments **must be made by phone** 24 hours in advance if possible.

Telephone: 715-232-2241 Ext. 3 Fax: 715-235-0888

Application forms and fee schedule can be found on our website: www.menomonie-wi.gov
Government-City Departments-Building Inspection-Forms & Fees